

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.D.		4/30/99
O.I.P.E. CLASSIFIER			75-7-49
FORMALITY REVIEW	EW	64934 64973	5 18 89 6 28 89

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through humeral) Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Date
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If more than 150 claims or 10 actions
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